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		Applicati	Application Number		10/594,348	
		Filing Da	Filing Date		09/26/06	
POWER OF	First Nan	First Named Inventor		Reynold Homan		
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS		Title	Title		USE OF A SERINE PLAMITOYL TRANSFERASE (SPT) INHIBITOR TO TREAT ATHEROSCLEROSIS AND DYSLIPIDEMIA	
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		Attorney	Attorney Docket Number		PC25819A	999935
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Applicant/Inventor.						
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Name Reynold Homan						
Signature Mandel Am						
Date 127 June 2007						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple						
forms if more than one signature is required, see below*.						
□ *Total of forms are submitted.`						

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Name Sotirios K. Karathanasis						
Signature	Signature					
Date	7/1/07					
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Name Robert L. Panek							
Signature	Robert 2 Vanek						
Date	60 /01/20						
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**Application Number** 10/594,348 Filing Date 09/26/06 **First Named Inventor** Reynold Homan POWER OF ATTORNEY Title **USE OF A SERINE PLAMITOYL** TRANSFERASE (SPT) INHIBITOR TO TREAT ATHEROSCLEROSIS AND DYSLIPIDEMIA CORRESPONDENCE ADDRESS **Art Unit** INDICATION FORM **Examiner Name** Attorney Docket Number PC25819A I hereby appoint: Practitioners at Customer Number 28523 OR Practitioners named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number OR Firm or Individual Name Address Address State City Zip Country Fax Telephone I am the: Applicant/Inventor. M Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Tae-Sik Park Signature **\*\*\*** Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*. ☐ \*Total of \_ \_\_ forms are submitted.

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